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CONFIRMATION NO. 8492

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|--|---|------------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/589,549   | <b>FILING OR 371(c) DATE</b><br>08/16/2006<br><b>RULE</b>   | <b>CLASS</b><br>296                | <b>GROUP ART UNIT</b><br>3612   | <b>ATTORNEY DOCKET NO.</b><br>016382-9017 |                                |
| <b>APPLICANTS</b><br>Franz Ulrich Brockhoff, Bramsche, GERMANY;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/DE05/00226 02/10/2005<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 10 2004 007 587.5 02/17/2004<br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 03/15/2007</b>                       |   |                                    |   |   |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <i>Dem. it-breda</i> <i>DP</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>17                 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>Mark A Ussal<br>Michael Best & Friedrich<br>Suite 3300<br>100 East Wisconsin Avenue<br>Milwaukee, WI53202-4108   |   |                                    |   |   |                                |
| <b>TITLE</b><br>Roof structure for a multi-purpose vehicle   |   |                                    |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>900  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |